

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HLC		6-22-01
O.I.P.E. CLASSIFIER		43	7/15/01
FORMALITY REVIEW	SS	573	08-14-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	Original
1	✓ 1/6/04
2	o
3	c
4	g
5	u
6	✓
7	✓
8	o
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	c
20	o
21	u
22	o
23	o
24	o
25	o
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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PFG-2C-185  
16/11/01